

1 PAMELA Y. PRICE, ESQ. (STATE BAR NO. 107713) – pypesq@aol.com
2 SHANNON SEIBERT, ESQ. (STATE BAR NO. 240317)
3 PRICE AND ASSOCIATES
4 A Professional Law Corporation
5 The Latham Square Building
6 1611 Telegraph Avenue, Suite 1450
7 Oakland, CA 94612
8 Telephone: (510) 452-0292
9 Facsimile: (510) 452-5625

10 Attorneys for Plaintiff
11 M. HOPE YOUNG

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UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA

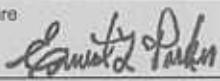
M. HOPE YOUNG,) NO. C07-02413 JSW
v.)
ALPHONSO JACKSON, IN HIS)
OFFICIAL CAPACITY AS SECRETARY)
OF THE U.S. DEPT. OF HOUSING AND)
URBAN DEVELOPMENT,)
MARC ROTHBERG, GEORGE)
WEIDENFELLER, and FAYE AUSTIN,)
Defendants.)

PROOF OF SERVICE OF SUMMONS
AND COMPLAINT AND RELATED PAPERS
ON ALBERTO R. GONZALES, U.S.
ATTORNEY GENERAL

AO 440 (Rev. 8/01) Summons in a Civil Action

RETURN OF SERVICE		
Service of the Summons and Complaint was made by me:		DATE August 13, 2007
Name of SERVER Shelley Isom	TITLE Legal Assistant	
Check one box below to indicate appropriate method of service:		
<input type="checkbox"/> Served Personally upon the Defendant. Place where served:		
<input type="checkbox"/> Left copies thereof at the defendant's dwelling house or usual place of abode with a person of suitable age and discretion then residing therein. Name of person with whom the summons and complaint were left:		
<input type="checkbox"/> Returned unexecuted:		
<input checked="" type="checkbox"/> Other (specify): Alberto R. Gonzales, U.S. Attorney General, U.S. Department of Justice 950 Pennsylvania Avenue, N.W. Washington, DC 20530-0001 by Certified Mail - Return Receipt Requested		
STATEMENT OF SERVICE FEES		
TRAVEL	SERVICES	TOTAL
DECLARATION OF SERVER		
<p>I declare under penalty of perjury under the laws of the United States of America that the foregoing information contained in the Return of Service and Statement of Service Fees is true and correct.</p> <p>Executed on <u>August 13, 2007</u> Date</p> <p> _____ Signature of Server Price and Associates 1611 Telegraph Avenue Oakland, CA 94612</p> <p>_____ Address of Server</p>		

R:\SMS\2801.02\SERVICE\return of svc form-gonzales.wpd

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none">■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.■ Print your name and address on the reverse so that we can return the card to you.■ Attach this card to the back of the mailpiece, or on the front if space permits.		<p>A. Signature  <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Address</p> <p>B. Received by (Printed Name) AUG 17 2007 C. Date of Deli</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>60 0003 6333 6817</p>	
1. Article Addressed to: <i>Alberto R. Gonzales U.S. Attorney General Dept. of Justice Pennsylvania Ave NW in DC 0530-0001</i>		<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	
Domestic Return Receipt		102505-02-M-1540	